PTO/SB/06 (08-03)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875										Application or Docket Number OG 75 75 464		
CLAIMS AS FILED – PART I (Column 1) (Column 2)							-	SMALL	ENTITY	OR		R THAN ENTITY
	FOR		NUMB	ER FILED	NUM	BER EXTRA		RATE	FEE		RATE	FEE
	SIC FEE CFR 1.16(a))					1		\$	OR		5790	
	TAL CLAIMS CFR 1.16(c))		12	minus 20 = •				x s =			x \$ =	
IND	EPENDENT CLAI CFR 1.16(b))	MS	3	minus 3	- 	•		x s=		OR OR	x \$_ =	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))							+\$ =		OR	+s =		
* If the difference in column 1 is less than zero, enter *0" in column 2.								TOTAL		OR	TOTAL	790
CLAIMS AS AMENDED - PART II											`	
(Column 1) (Column 2) (Column 3)						1 1	SMALL	ENTITY/	OR		R THAN ENTITY	
AMENDMENT	4128/4	REI A	LAIMS WAINING JETER NOMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c)) Independent		7	Minus	20	= /		x \$=		OR	_x \$=	
	(37 CFR 1.16(b))		3	Minus	3 .]_/		x \$=		OR.	x \$=	
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CER 1.16(d))							+ \$=	<u>L</u>	OR	+ s =	
							TOTAL ' ADD'L FEE	·	OR	TOTAL ADD'L FEE		
	(Column 1) (Column 2) (Column 3)								1			
AMENDMENT B		REA A	LAIMS MAINING FTER NDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))			Minus	**	=		x s=		OR	x \$=	
ŒN	Independent (37 CFR 1.16(b))	*		Minus	***	=		x \$=		OR	x \$=	
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+ \$=		OR	+ s_ =	
								TOTAL ADD'L FEE		OR .	TOTAL ADD'L FEE	
			umn 1)		(Column 2)	(Column 3)	_					
ENT C		REM AF	AIMS IAINING TER NDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
DM	Total (37 CFR 1.16(c))	•		Minus	**	=	L	x s=		OR	x s=	
AMENDMENT	Independent (37 CFR 1.16(b))	* .		Minus	***	-		x \$=		OR	x \$=	
Ą	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+ \$=		OR	+ \$=	
								TOTAL ADD'L FEE		OR .	TOTAL ADD'L FEE	
 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. 												

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number:

09/754264

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER	
	TAL OLABAD		(Column 1)		(Column 2)			TYPE		OR	SMALL ENTITY	
ĭ	OTAL CLAIMS		·					RATE	FEE		RATE	FEE
FC	R		NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
TO	TAL CHARGEA	BLE CLAIMS	mir	us 20=	•			X\$ 9=		OR	X\$18=	
INC	EPENDENT CL	AIMS	mi	nus 3 =	*			X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	
*# the difference in column 1 is less than zero, enter "0" in						olumn 2	ı	TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II)	OTHER	THAN
		(Column 1)	(Column 2)			(Column 3)		SMALL	ENTITY	OR	SMALL	NTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 9	Minus	** 0	<i>20</i>			X\$ 9=		OR	. X\$18≑	
	Independent	• 3	Minus	***	3	. —		X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280 -	
	, ple	1/20/03						TOTAL ODIT. FEE		^	TOTAL ADDIT. FEE	7/
ር	<u>/</u>	(Column 1)	(Column 2)			(Column 3)						
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE /		RATE	ADDI TIONAL FEE
	Total	• 20	Minus	2)	= / .	$\left \cdot \right $	X\$ 9=		OR	X\$18=	
	Independent	• 3	Minus	*** }		=/		X42=		OR	X84=	
•	FIRST PRESE	NTATION OF MU	LTIPLE.DEF	ENDENT	CLAIM		!	<u> </u>				
•	• • • • • • • • • • • • • • • • • • • •		•				Ĺ	+140= .		OR	+280=	. !
			,				A	TOTAL DDIT. FEE		OR	TOTAL ADDIȚ. FEE	———
	•	(Column 1)		(Colur		(Column 3)			. 4			
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE :	,	RATE	ADDI- TIONAL FEE
	Total	*	Minus	state .		-		X\$ 9=	•	OR	X\$18=	
	Independent	*-	Minus .	***		=	 	X42=		OR	X84=	
٩	FIRST PRESE	NTATION OF ML	ILTIPLE DEF	ENDENT	CLAIM		╏╌┠╴			Un		
٠.	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+280=	
**	f the "Highest Nur	nber Previously Pa	d For IN THE	S SPACE	s less thai	1 20, enter "20."	• A	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												